

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name and address)</i>  <hr style="width: 10%; margin-left: 0;"/>  TELEPHONE NO.: _____ FAX NO. <i>(optional)</i> : _____ ATTORNEY FOR <i>(Name)</i> : _____	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER:	
<b>FINDINGS AND ORDER AFTER HEARING</b>	
CASE NUMBER:	

1. This proceeding was heard  
 on *(date)*: \_\_\_\_\_ at *(time)*: \_\_\_\_\_ in Dept.: \_\_\_\_\_ Room: \_\_\_\_\_  
 by Judge *(name)*: \_\_\_\_\_ ☐ Temporary Judge

☐ Petitioner/plaintiff present      ☐ Attorney present *(name)*: \_\_\_\_\_  
☐ Respondent/defendant present      ☐ Attorney present *(name)*: \_\_\_\_\_  
☐ Other present      ☐ Attorney present *(name)*: \_\_\_\_\_  
 On the order to show cause or motion filed *(date)*: \_\_\_\_\_ by *(name)*: \_\_\_\_\_

**2. THE COURT ORDERS**

- |                               |   |   |
|-------------------------------|---|---|
| 3. Custody and visitation:    | <input type="checkbox"/> As attached on form FL-341 | <input type="checkbox"/> Not applicable |
| 4. Child support:             | <input type="checkbox"/> As attached on form FL-342 | <input type="checkbox"/> Not applicable |
| 5. Spousal or family support: | <input type="checkbox"/> As attached on form FL-343 | <input type="checkbox"/> Not applicable |
| 6. Property orders:           | <input type="checkbox"/> As attached on form FL-344 | <input type="checkbox"/> Not applicable |
| 7. Other orders:              | <input type="checkbox"/> As attached                | <input type="checkbox"/> Not applicable |

8. ☐ Attorney fees *(specify amount)*: \$ \_\_\_\_\_  
 Payable to *(name and address)*: \_\_\_\_\_  
 Payable ☐ forthwith ☐ other *(specify)*: \_\_\_\_\_

9. All other issues are reserved until further order of court.

Date: \_\_\_\_\_ ▶ \_\_\_\_\_  
JUDICIAL OFFICER

Approved as conforming to court order.

▶ \_\_\_\_\_  
 SIGNATURE OF ATTORNEY FOR ☐ PETITIONER / PLAINTIFF ☐ RESPONDENT / DEFENDANT